



# MALVERN ST JAMES

## Girls' School

### **Medical Policy and Procedures: including First Aid, Medical Conditions, Medical Emergencies, Good Practice Guides and Pandemic Procedure**

This policy is applicable to all pupils from Reception to Year 13. It is the responsibility of The Director of Pastoral Care and will be reviewed and updated annually.

#### **Scope**

This policy covers the processes to be undertaken when a member of the School community becomes unwell, is injured or in the case of a medical emergency. This policy must be read in conjunction with the school's Safeguarding Policy which includes the Statutory Guidance issued by the Department for Education "Keeping Children Safe in Education" (September 2020), the Educational Visits Policy, the Boarding Handbook, the Mental Health and Wellbeing Policy and the Self Harm Policy.

#### **Introduction**

The policies and guidance within this document are for teaching and boarding staff and detail the administration of medicines and advice on health issues. Guidance is also given for members of staff leading School trips. The aim is to maintain standards of 'best practice' throughout the School.

This document is included in the First Aid bags for School trips.

All staff should be aware of the Ailments List available on iSAMS and should familiarise themselves with any significant ailments that a girl in their care may have.

The list identifies girls who have Health Care Plans for specific medical conditions. These are more detailed and kept in the Health and Wellbeing Centre. They should be consulted before any school trip, by the Trip Leader, when an attending pupil has a Health Care Plan. Any member of staff, who has any concerns regarding girls with minor ailments or significant medical conditions, can contact the Health and Wellbeing Centre for advice.

All medical information is confidential and must be stored appropriately. On no account must this information be kept in first aid bags, folders etc. where there is open access.

#### **Confidentiality**

As part of the NMC Code: Standards of conduct, performance and ethics for nurses and midwives (NMC 2008) our school nurses are obliged to uphold medical confidentiality. A breach of confidence by a nurse may result in disciplinary action by their regulatory body I. Nurses also have a legal (common law and statutory) duty of confidentiality to pupils.

#### **Nurses Statement**

In accordance with staff's professional obligations, medical information about girls, regardless of their age, will remain confidential. However, in providing medical and nursing care for a girl, it is recognised that on occasions the doctor and nurse may liaise with the Headmistress and other pastoral staff, boarding staff and parents or guardians, and that information, ideally with the pupil's prior consent, will be passed on as necessary.

With all medical and nursing matters, the doctor and nurses will respect a girl's confidence except on very rare occasions when, having failed to persuade the girl, or her authorised representative, to give consent to divulgence, the doctor or nurse considers that it is in the girl's better interests or necessary for the protection of the wider community to pass information to a relevant person or body.

### **First Aid**

First Aid will be administered to all pupils from EYFS to Year 13 by the School Medical Officer, Health and Wellbeing Centre Staff and/or designated First Aiders as listed. First Aiders will be retrained every 3 years.

### **Staff and Qualifications**

Malvern St James has a Health and Wellbeing Centre staffed by a qualified healthcare professional 24 hours per day. In addition, several members of staff, and all of the minibus drivers are qualified First Aiders. We also have access to a General Practitioner (known as the school Medical Officer) who holds four surgeries a week and is contactable in an emergency.

A list of all staff holding First Aid qualifications, including details about Paediatric First Aiders and requalification dates is available to staff on Firefly. An updated version is emailed to all staff at the start of each academic year (**Appendix 1a**)

### **Procedures in School**

First Aid boxes are located at various points around the School and on the School minibuses. An updated list of locations is available on Firefly for reference (**Appendix 1b**) A Guide to First Aid is included along with a supply of plastic gloves that will be used when treatment is required, to avoid the risk of cross-infection. The contents of the medical kits are maintained by the Health and Wellbeing Centre staff in accordance with the Health and Safety (First Aid) Regulations 1981.

For minor incidents, girls will be sent or escorted to the Health and Wellbeing Centre for attention. In incidents of a more serious nature, the casualty will not be moved (unless in immediate danger) and assistance will be requested from the Health and Wellbeing Centre or available First Aider. Appropriate treatment will be administered and a decision made whether to send for the School Nurse, if not already in attendance, or to call for an ambulance, or both. Telephones are available throughout the School.

The appointed person(s) will take charge of any incident that requires further assistance, e.g. ambulance being called, hospitalisation, etc. He/she should ensure that a student who is sent to hospital by ambulance is either:

- Accompanied in the ambulance at the request of paramedics
- Followed to a hospital by a member of staff to act in loco parentis until a relative arrives
- Met at hospital by a relative / guardian, where possible

The Health and Wellbeing Centre Nurse or First Aider need not be the member of staff to accompany the casualty to hospital, however, an appropriate member of staff should be sent. The Headmistress must be informed immediately of all emergency hospital visits.

The accompanying member of staff will keep a record of the nature of the injury/illness and any treatment given, on CPOMS (the school pastoral logging system). In the case of an accident, the Accident Form (available on Microsoft Teams) must be completed by the appropriate person. The Health and Safety Officer will then forward the Accident Form to the Headmistress, Director of Pastoral Care and any other relevant member of staff. The Director of Operations and Compliance will assess the report and complete the RIDDOR report if required.

### **In MSJ Prep (including EYFS)**

Commitments:

- There is always a Paediatric First Aider on site when EYFS children are present
- There is always at least one First Aider on site while pupils are at school
- There is always a first aider present on Prep Educational Trips
- There is always a Paediatric First Aider present on EYFS Trips

In addition to the school records, parents in the Prep Department are alerted if their child has received First Aid, by a conversation or an email and it is then logged on CPOMS with details of the illness/injury and any treatment given. Written information about First Aid will be recorded in a pupil's book-bag, but teachers aim to catch parents personally to discuss any accidents wherever possible.

Pupils visiting MSJ provide a completed mini Health Questionnaire which gives details of any medical conditions and allergies as well as contact numbers for parents / guardians. If a visiting pupil is unwell or injured during her time at MSJ, she will be cared for in the Health and Wellbeing Centre and the parent / guardian will be informed.

Prior to starting at MSJ, parents / guardians are told the following:

- A child may not come back to school for 48 hours after symptoms of infectious vomiting or diarrhoea have ceased
- If a child contracts a notifiable disease, parents/guardians will notify the school immediately

### **On the Games Field and in Classrooms**

- Where there is an incident on the Games Field, the member of staff in charge must have access to a telephone or carry with them a mobile telephone
- All Departments in the school have at least one member of staff with current First Aid certificate and this person should be called to attend the incident where possible
- The Staff member teaching the lesson should send the pupil to the Health and Wellbeing Centre providing she is able and well enough; she can be accompanied by another pupil/member of staff for support
- If the pupil is unable to get to the Health and Wellbeing Centre, then a member of staff should contact the Health and Wellbeing Centre and the nurse will attend the pupil at the location where her injury occurred
- In the event that the nurse is unable to leave the Health and Wellbeing Centre she must be relieved by another member of staff
- The parents will be contacted by a member of the Health and Wellbeing Centre
- The Staff member who witnessed the incident must provide a report via email to the Health and Wellbeing Centre
- The Staff member who witnessed the incident must carry out a courtesy follow-up call to parents
- For treatment of head injuries, please see **Appendix 2**
- For advice on the treatment of specific medical conditions, please see **Appendix 3**

### **Out of School**

This section should be read in conjunction with the Educational Visits Policy.

Wherever possible a qualified first aider should accompany all School trips and expeditions. It is appreciated that, in some situations, this will not be possible. However, there is always a First Aider present on Prep trips; there is always a Paediatric First Aider present on EYFS trips.

The member of staff responsible for the trip will generate a copy of the Medical Ailments list relating to the girls attending the trip available on iSAMS.

A school mobile telephone or a personal equivalent must be taken on trips and expeditions out of school.

If the trip is via minibus or coach, these will carry a first aid kit. The Trip Leader will also carry a first aid kit and any medication required by individual girls. Any medication or first aid administered should be recorded for reporting back to the Health and Wellbeing Centre, Boarding House and parents.

### **Accident Forms**

Details of every incident, however minor, must be recorded on the accident form, available on Microsoft Teams by the Health and Wellbeing Centre staff or the member of staff who was in charge at the time of the incident, as appropriate. Completed forms will be filed in the Operations Department. The same procedure must be used for near-miss incidents. All accidents are reported to the Director of Operations and Compliance to ensure the prevention of future accidents where possible.

### **Reporting to Parents**

The Health and Wellbeing Centre will ensure that parents and Housemistress (for boarders) are notified of any illness or injury that requires their daughter being kept in the Health and Wellbeing Centre for longer than 2 hours or requires them to be hospitalised.

In the case of day girls, parents should be encouraged to collect their daughter from the Health and Wellbeing Centre and take them home if an illness or injury prevents them from returning to lessons. Boarders will be cared for either in the Health and Wellbeing Centre when isolation or quiet rest is required, or within the boarding area if injury or illness permits. Guardians should be encouraged to collect boarding pupils where illness or injury prevents them from returning to school within the near future.

### **Reporting to HSE**

All accidents involving staff, pupils and visitors will be reported initially to the Director of Operations and Compliance, who will then report to the Health and Safety Executive in line with the legal requirements under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, 1995 as amended 2012) (Incident Contact Centre (ICC) – 0845 300 99 23) The Director of Operations and Compliance is responsible for RIDDOR reporting where necessary.

### **Pupils with Ongoing Medical Conditions**

On entry to the School, every pupil's parent or guardian is required to complete a 'Health Questionnaire'. This form provides the School Health and Wellbeing Centre with information about pupils' past medical history. The only personnel allowed to gain access to this information in full, are members of the Health and Wellbeing Centre Team. The information required to keep the child safe whilst in School is then entered into iSAMS. For example, allergies requiring an adrenalin auto-injector (**Appendix 4**) or a history of asthma (**Appendix 5**). The Wellbeing Centre also draw up an anaphylaxis list and an asthma list. These are displayed in the staff room and other areas deemed appropriate in order to ensure the safety of those girls.

## Health Care Plans

Once MSJ is informed that a pupil has a chronic or life-threatening condition a meeting is scheduled by the Health and Wellbeing Centre to discuss what support may be needed. This meeting will include parents/guardian, the girl (if old enough), school health staff, the Director of Pastoral Care and the girl's previous teacher, if applicable. Health care providers, such as the pupil's paediatrician will be invited or asked to provide information in writing. The meeting should take place before the pupil starts at MSJ.

The purpose of this meeting will be to produce a written document outlining a health care and emergency plan that clearly describes the services the pupil may need. The following information should be in the document:

- A brief medical history
- Any special educational or emotional needs
- Medicine or procedures required during the school day
- Special dietary needs
- Transportation needs
- Possible problems, special precautions
- Paediatrician's name and contact details
- Emergency plans and procedures (including whom to contact)

The goal of this meeting is to develop a written plan that clearly describes the services the girl needs. This plan outlines exactly what health care the girl will receive and provides information for any emergency treatment that may be required.

Parents will be asked to give their consent for the Health and Wellbeing Centre Staff to administer any medication or emergency treatment. If a child requires a controlled medicine or special procedures, the school must receive written instructions from a relevant medical practitioner.

Health Care Plans should be reviewed annually to ensure they continue to meet a pupil's needs. It is the parents' responsibility to inform the school of any changes to a girl's condition or medical needs between review dates. For advice on all relevant medical conditions for boarding staff and teachers please see **Appendices 6,7 & 8**. Specific advice on Medical Emergencies can be found in **Appendix 9**. The school Pandemic Procedure can be found in **Appendix 10**.

## List of Appendices

<b>Appendix 1</b>	<b>First Aid</b> current list of First Aiders including specific qualification and expiry date location of all First Aid Boxes around school
<b>Appendix 2</b>	<b>Head Injuries</b> treatment head bump letter
<b>Appendix 3</b>	<b>Advice on Medical Conditions for Boarding Staff and Teachers</b> abdominal pain colic diabetes diarrhoea and vomiting epilepsy insect bites or allergic reactions nose bleeds period pain splinters toothache upper respiratory tract infection (common cold)
<b>Appendix 4</b>	<b>Adrenaline Auto-Injectors</b> storage guidance for use staff training (including list of those currently trained)
<b>Appendix 5</b>	<b>Asthma</b> guidance for treating asthma emergency asthma kits example letter to parents
<b>Appendix 6</b>	<b>Good Practice Guide</b> disposal of bodily fluids control of head lice hot water bottles & heat pads steam inhalations
<b>Appendix 7</b>	<b>Homely Remedies Guide</b> which homely remedies can be used and amounts to be given when to give homely remedies when to contact the Health and Wellbeing Centre Piriton administration Paracetamol administration medication record form
<b>Appendix 8</b>	<b>Administration of Medication</b> prescription drugs non-prescription medication safe storage, dispensing and recording of medicines disposal of medicines self-medication risk assessment ( <i>years 9-13 only</i> ) summary of annual medical talk to Sixth Form
<b>Appendix 9</b>	<b>Medical Emergencies Procedure</b>
<b>Appendix 10</b>	<b>MSJ Pandemic Procedure</b>

## Appendix 1a – First Aiders

<b>Department</b>	<b>Name</b>
Administrator	BEMAND, Maxine
Administrator	CLIFTON, Sarah
Administrator	INMAN, Helen
Administrator	SHEPPARD, Sally
Administrator	STEPHENS, Julie
Administrator	WEATHERHEAD, Phillippa
Art	WEISSBERG, Diana
Biology	PHIPPS, Natasha
Boarding	HOOKHAM, Christine
Boarding Grad	GILMOUR, Jenna
Boarding/Hatfield	DUFFY, Orla
Boarding/Mount	HAW, Keri
Boarding/Poulton	MACDONALD, Heather
Careers	MARFLEET, Samantha
Chaplain	FISHER, Katie
Drama	FISHER, Juliet
Driver	BANNISTER, Lawrence
Driver	DOWSE, Stephen
Driver	FREDERICKS, Shirley
Driver	GLASS, Christopher
Driver	HILL, Gary
Driver	WIGGETT, Jane
Driver	WILSON, Nigel
DT	PRIOR, Alice
Estates	FREDERICKS, Mark
Estates	WILSON, Philip
Estates/Driver	MAINE, Geoffrey
Food	BUCKLEY, Lisa
Food	CRAWFORD, Georgia
Food	PARKER, Joanna
Food	TURNER, Sally
French	REDFERN, Laure
Geography	LEWIS-HOPKINS, Roxanne
German	ZIMNOWODZKI, Yasmin
Greenslade	DIN, Violeta
Head of Year/Business	HEMPHILL, Zoe
Head of Year/English	HUBBARD, Karen
Head of Year/Music	MILLER, Lucy
Health Centre	DENNISON, Charlotte
Health Centre	PICKIN, Beverley
Health Centre/Prep Dept	WESTON, Sarah
Hospitality	MOLONEY, Molly
Housekeeping/Prep Dept	GODWIN, Sophie
Kitchen	FERGUSON, Susan
Latin	KINGSHOTT, Alison
Library	NEVILLE, Penny
Outdoor Pursuits	WATSON, Richard
PE	EVANS, Lauren
PE	ROBERTS, Samantha
PE	SMITH, Rebecca
PE	TAMPLIN, Ceri
Prep Department	ARIS, Emma J
Prep Department	JERRAM, Shelley

Prep Department	PEARSON, Belle
Prep Department	PRITCHARD, Linda
Prep Department	RADLEY, Nicole
Prep Department	SMITH, Kirsten
Prep Department	STANLEY, Poppy
Prep Department	TOWNSEND, Sarah
Religious Studies	COLLETT, Victoria
SMT/Deputy Head	FOWLES, Fiona
SMT/Dir of Pastoral Care	WILKINSON, Zinnia
SMT/Geography	HUTTON, Lucy
SMT/Poulton	VAN RAVENSTEIN, Anouska
Speech & Drama	MUNN, Sasha
Sports Centre	BUCKLAND, Chloe
Sports Centre	FREEBURY, Christopher
Sports Centre	VAUGHAN, Simon
Technician/Science	JONES, Bridget



## Appendix 1b – Location of First Aid boxes Around School

### Location of Wall Mounted, Accessible First Aid Kits

Reception	by defibrillator
2nd Floor	2nd Floor Landing by Lift
York Hall	York Hall Corridor
Science	1st Landing
Art	Ground Entrance
Food tech	Corridor Outside
Pool	Wall by Toilets
Sports	Reception PE First Aid Room
Dome	Reception
Music	Ground Kitchen
Mount	Outside duty room
Poulton	3 <sup>rd</sup> floor by lift
Hatfield	House reception by fire panel
Batsford	Outside duty room
Greenslade	House reception by duty office
Benhams	By oak door entrance
Catering	Kitchen
Prep	EYFS Classroom
Estates, housekeeping and transport	Lower Basement
Laundry	by Sink

**Total            21**

## Appendix 2 – Treatment of Head Injuries

All injuries to the head will be treated with particular care and must be assessed by a qualified nurse in the School Health and Wellbeing Centre. The nurse will ensure that any casualty who has sustained a significant head injury is seen by professionals at hospital, either by sending them directly to hospital via a 999 call, or by asking parents to pick up a child to take them to hospital if this is felt to be more appropriate.

Pupils suffering from a head injury will not be left unattended until a medical professional is confident that a serious injury has not been sustained. The nurse will assess and monitor any pupil who has sustained a minor head injury for a minimum of 30 minutes after she sustains the injury to observe for any head injury symptoms. An advisory note will be sent home to the parent of any day girl who has had a minor injury to the head requiring first aid attention in the Health and Wellbeing Centre. In the case of a boarder, the Duty Nurse will aim to make telephone contact with the relevant Parents or Guardian. In addition, an email will be sent to the Housemistress and Parents/Guardian. The Headmistress, Director of Pastoral Care and Director of Boarding (in the case of a boarder) will be alerted immediately

A girl remaining in school after a head injury will be advised against running around, playing strenuous games and undertaking PE for the rest of the day. The school staff will not offer the injured girl any pain relief that may mask her symptoms. If a pupil sustains a head injury while playing sport at another school, she should be assessed by the first aid trained member of staff. She should not be allowed to continue to play sport. If there are any concerns medical advice should be sought before they return home to Malvern St James.

It will be made very clear to the girl that if she is discharged from the Health and Wellbeing Centre and she later feels unwell she must report this immediately to her teacher and return to the Health and Wellbeing Centre accompanied by a friend or member of staff.

All head injuries are reported using the Accident Report which is sent to the Headmistress, The Director of Operations and Compliance (for RIDDOR reporting), the Director of Pastoral Care, The Director of Boarding and the relevant Housemistress. A member of the Health and Wellbeing Centre will follow up with parents / boarding staff appropriately.

### Template for Head Bump Letter

Date:

Dear Parents/Guardians,

Your daughter sustained a bump on the head at school today at \_\_\_\_\_.

We have checked her for signs and symptoms of head injury in the Health and Wellbeing Centre and she seems well.

It is unlikely that she will have any further problems, however, if any of the following symptoms occur, you should seek further medical advice as soon as possible:

- Unconsciousness
- Any confusion (not knowing where things are or getting muddled up)

- Any drowsiness (feeling sleepy) that goes on for more than 1 hour when she wouldn't usually be tired
- Any problems understanding or speaking
- Any loss of balance or problems walking
- A severe headache which will not respond to analgesia (Paracetamol, Calpol)
- Any vomiting or nausea
- Any fits (collapsing or passing out suddenly)

We advise that your daughter rests quietly and avoids strenuous activity.

If you have any queries, please contact the Duty Nurse in the Health and Wellbeing Centre on 01684 574 454.

Yours sincerely,

## **Appendix 3 - Advice on Medical Conditions for Boarding Staff and Teachers**

Boarding Staff and Teachers are expected to be aware of any medical needs the girls in their houses or teaching groups may have. Information on individual girls' medical conditions are listed on iSAMS and can be obtained directly from the Health and Wellbeing Centre Staff upon request.

### Abdominal Pain

Acute abdominal pain must be assessed by a member of staff in the Health and Wellbeing Centre. If there appears to be a high temperature with or without vomiting, transfer to Health and Wellbeing Centre immediately.

Persistent pain that has been intermittent for a longer period of time can be assessed in the morning surgery by the Medical Officer.

Anaphylaxis - see **Appendix 4**

Asthma - see **Appendix 5**

### Colic/Abdominal 'Wind' Pain

Ease with heated wheat bag (see **Good Practice Guide, Appendix 6**). Administer peppermint tea.

### Constipation

Advise an increase in fluids and soluble fibre (fresh fruit, dried fruit and wholegrain). If the problem persists, it should be reviewed in Health and Wellbeing Centre.

### Diabetes

All girls with diabetes are listed on iSAMS. They each have a Health Care Plan with information specific to their condition. Please ask Health and Wellbeing Centre staff for a copy if you are taking any girls with diabetes on a school trip or you regularly teach a girl with diabetes.

### Diarrhoea and Vomiting

All girls with diarrhoea and or vomiting should be assessed in the Health and Wellbeing Centre and will be admitted until they are clear of any infectious diarrhoea or vomiting for at least 48 hours. If parents are unsure whether they should be returning their daughter to school after an incident of vomiting, they should be asked to speak to the Duty Nurse for advice on this. If there is a severe diarrhoea and vomiting illness in the local community, the School Medical Officer can extend the period of isolation. Please give as much history as possible to member of staff regarding symptoms, time of onset and history of food eaten.

### Epilepsy

All girls with Epilepsy are listed on iSAMS. They each have a Care Plan with information specific to that girl and her treatment. Please ask Health and Wellbeing Centre staff for a copy if you are taking any girls with epilepsy on a school trip or you regularly teach a girl with epilepsy.

### Insect Bites or Allergic Reactions

Most bites and stings are treated by washing the affected area with soap and water and by placing a cold compress (a flannel or cloth soaked in cold water) over the area to reduce swelling. Advise the pupil not to scratch the affected area to avoid infection. If she is in pain or the area is swollen, take analgesia according to Homely Remedies Guide (**Appendix 7**). If there is a more serious reaction consult a member of the Health and Wellbeing Centre team.

### Nose Bleeds

Sit down leaning slightly forward and apply firm pressure below the bridge of nose. If the bleeding does not stop after 15 minutes, consult a member of Health and Wellbeing Centre staff.

### Period Pain

Use analgesia according to Homely Remedies Guide. Administer heated wheat bag according to Good Practice Guide. If period pain becomes regularly severe, an appointment can be made with the School Medical Officer for an assessment and possible prescription.

### Splinters

If a splinter is proud of the skin, then it can be removed with tweezers in the direction that it went in. A first aider should not remove a splinter from the eye or if the splinter crosses a joint. In these cases, any splinter should be removed by a qualified healthcare practitioner.

### Toothache

Treat initially with Paracetamol according to Homely Remedies Guide. If symptoms are severe and persist, a dental assessment may be required. Check with Finance to confirm if the girl is covered by the school Den-Plan Policy. Parents or Guardians should accompany pupils needing dental treatment.

### Upper Respiratory Tract Infection (Common Cold)

Usually the viruses causing the common cold are self-limiting, lasting from 2 to 7 days. Girls who are feeling unwell and appear to have a high temperature should be referred to the Health and Wellbeing Centre for an assessment. Otherwise, treatment should be as follows adhering strictly to the Homely Remedies Guide

- Encourage fluids
- Administer Paracetamol
- Administer lozenge if throat is sore
- Administer Simple Linctus if cough developed
- Use steam inhalation for nasal and sinus congestion.

## **Appendix 4a - Adrenaline Auto-Injectors**

### **Storage of Adrenaline Auto-Injectors**

All girls with a severe allergy are listed on iSAMS. They each have a Health Care Plan with information specific to their condition. Please ask Health and Wellbeing Centre staff for a copy if you are taking any girls with severe allergies on a school trip or if you regularly teach a girl with a severe allergy. Please see the adrenaline auto-injector guidance for more information - Each girl has a second Adrenaline Auto-injector in the staff room. Each girl has a separate pocket in a specially designed wall hanging. Each pocket has a photograph of the girl pinned to the front of the pocket and each pocket contains the adrenaline auto-injector, the Care Plan and emergency contact details for each of the girls.

The Boarding House holds a third Adrenaline Auto-Injector for all boarders. The Health and Wellbeing Centre has a spare Adrenaline Auto-Injector as a precaution; this can be administered to any girl that is already prescribed an adrenaline auto-injector, by any member of staff.

### **Guidance for the use of Adrenaline Auto-Injectors**

Any girl with a history of anaphylaxis (severe allergic reaction) will have a Health Care Plan and at least two prescribed Adrenaline Auto-Injectors with her name on the pharmacy label (a syringe containing adrenaline) for her to use in the event of an emergency. She must keep one with her at all times and is responsible for transferring it between bags and taking it on all School trips. In the Prep, class teachers must ensure the Adrenaline Auto-Injector is taken to lessons in different departments.

If a pupil who has been prescribed medication encounters the substance that she is allergic to and thus develops the following severe symptoms which cause her to have breathing difficulties and severe weakness and/or collapse, then the Adrenaline Auto-Injector must be administered at once. This is an emergency situation and a lifesaving procedure.

Symptoms of Anaphylaxis are

- a narrowing of the airway, wheezing
- tightening of the throat, possibly hoarseness
- difficulty breathing, shortness of breath
- swelling of lips and tongue
- there may or may not be a rash present (wheals)

If possible, the girl should be helped to administer the Adrenaline Auto-Injector herself. If she is losing consciousness, a member of staff can administer the treatment if they have attended a training session within the last 12 months. Always call for assistance if an auto-injector is used (999 / 112)

### **School Trips**

The lead member of staff must ensure that all girls prescribed Adrenaline Auto-Injector have two devices on their person before leaving School.

### **Day-Girls and Flexi- Boarders**

It is the responsibility of parents of day girls and flexi boarders to renew prescriptions with their family GP. The School Medical Officer only prescribes Adrenaline Auto-Injectors for boarders and weekly boarders that are registered as her patients.

## PROCEDURE FOR ADMINISTRATION OF ADRENALINE AUTO-INJECTOR

- **First check the name on the Adrenaline Auto-Injector is correct.**
- If another person is available, he/she must call an ambulance immediately and then contact the Health and Wellbeing Centre requesting a member of staff to attend with a second Adrenaline Auto-Injector while the first attendee cares for the patient and helps her to administer the Adrenaline Auto-Injector
- If another person is not available and the girl is struggling to breathe, she should be helped to administer the Adrenaline Auto-Injector first and then the ambulance and Health and Wellbeing Centre should be called immediately by the attendee.
- NB. If the symptoms are less severe and breathing is not affected, the Health and Wellbeing Centre should be called before helping the girl to administer her Adrenaline Auto-Injector and a member of staff requested. However, if the patient's breathing deteriorates before a nurse arrives, the Adrenaline Auto-Injector should be administered.

### Instructions for the Emerade

## Your adrenaline pen for emergency treatment of anaphylaxis

Emerade is an adrenaline auto-injector used for the emergency treatment of severe acute allergic reactions ([anaphylaxis](#)) to foods, medicines or insect stings. It can also be used for exercise induced anaphylaxis. If you experience anaphylaxis, use your Emerade immediately.

Emerade is a Prescription only Medicine and is available in Sweden, France, Spain, the Netherlands, the UK, Ireland and Germany.





### Instructions for the EPIPEN


<b>1</b> <b>Pull off Blue Safety Cap.</b> Grasp EpiPen® in dominant hand, with thumb nearest blue cap and form fist around EpiPen® and pull off the blue safety cap. <b>Remember: "Blue to the sky, orange to the thigh".</b>		<b>3</b> <b>Jab Orange Tip.</b> Jab the EpiPen® firmly into outer thigh at a right angle (90° angle). Hold firmly against thigh for 3 seconds. EpiPen® should be removed and safely discarded. The orange needle cover will extend to cover the needle.	
<b>2</b> <b>Position Orange Tip.</b> Hold the EpiPen® at a distance of approximately 10cm away from the outer thigh. The orange tip should point towards the outer thigh.		<b>4</b> <b>Dial 999.</b> Dial 999, ask for ambulance and state "anaphylaxis".	


### Instructions for the JEXT


## Instructions for use

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1, Grasp the Jext injector in your dominant hand (the one you use to write with) with your thumb closest to the yellow cap.
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2, Pull off the yellow cap with your other hand.
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3, Place the black injector tip against your outer thigh, holding the injector at a right angle (approx 90°) to the thigh.
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4, Push the black tip firmly into your outer thigh until you hear a 'click' confirming the injection has started, then keep it pushed in. Hold the injector firmly in place against the thigh for 10 seconds (a slow count to 10) then remove. The black tip will extend automatically and hide the needle.
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5, Massage the injection area for 10 seconds. Seek immediate medical help.

Call 999, ask for an ambulance and say "anaphylaxis". If you are unable to make the call, get someone else to call for you.

**BE PREPARED:** Use a second Jext after 5-15 minutes if the symptoms do not improve.



## Appendix 4b – Staff Training

The Health and Wellbeing Centre offers training for all staff annually, and has a range of training syringes. Instruction is provided to all members of staff, so that they feel more confident in assisting. Please contact the Health and Wellbeing Centre for an appointment if you require instruction. You must have received training within the previous 12 months in order to be covered to administer an adrenaline injection.

AMODEO HOWELL, Fiorella  
AMOS, Elizabeth  
ARIS, Emma  
ATTFIELD, Daniel  
AYNSWORTH, Carolyn  
BEAUMONT, Julian  
BELL, Elizabeth  
BEMAND, Maxine  
BOWDREY, Megan  
BUCKLEY, Lisa  
BURTON, Holly  
CLIFT, Selina  
COLLETT, Victoria  
COLLINS, Alison  
COOPER, Louise  
CRAMP, Dinah  
CRAWFORD, Georgia  
DOBSON, Gemma  
DUFFY, Orla  
EVANS, Lauren  
FERGUSON, Susan  
FISHER, Alexander  
FISHER, Juliet  
FISHER, Katie  
FORSYTH, Paul  
FOWLES, Fiona  
GUY, Sarah  
HAIGHTON, Rachel  
HARRIS, Patrick  
HAW, Keri  
HEMPHILL, Zoe  
HOOKHAM, Christine  
HUTTON, Lucy  
INMAN, Helen  
JERRAM, Shelley  
JONES, Deborah  
JONES, Rebecca  
KINGSHOTT, Alison  
LEWIS-HOPKINS, Roxanne  
MACDONALD, Heather  
MARFLEET, Samantha  
MEREDITH, Fiona  
MILLER, Lucy  
MOLONEY, Molly

MORRIS, William  
MUNN, Sasha  
NEVILLE, Penelope  
PARVEEN, Rehana  
PEARSON, Belle  
PHIPPS, Natasha  
PRIOR, Alice  
PRITCHARD, Linda  
RADLEY, Nicole  
REDFERN, Laure  
RHODES, Lesley  
RICHARDSON, Mollie  
ROBERTS, Samantha  
SHAW, Graham  
SMITH, Rebecca  
STANLEY, Poppy  
STEPHENS, Arielle  
STEPHENS, Julie  
TAMPLIN, Ceri  
TOWNSEND, Sarah  
TURNER, Sally  
VAN RAVENSTEIN, Anouska  
VANT, James  
WADMAN, Brigitte  
WALKER, Jane  
WALKER, Penelope  
WALLACE, Catherine  
WEISSBERG, Diana  
WESTON, Sarah  
WHITMORE, Isla  
WILSON, Philip  
WINSTONE, Julie  
ZIMNOWODZKI, Yasmin

## Appendix 5 – Asthma Treatment

All girls who suffer with Asthma are listed on iSAMS. These girls do not have a Care Plan unless they have a severe form of Asthma.

A girl is having an Asthma attack if:

- Her reliever is not helping
- Her symptoms are getting worse (cough, breathlessness, wheeze or tight chest)
- She is too breathless or it's difficult to speak, eat or sleep
- Her breathing is getting faster and she feels like she can't get her breath properly

The school adopts the Department of Health Guidance on the Use of Emergency Salbutamol Inhalers in Schools (2015). Please see guidance on using and storing an inhaler and example letter to Parents

### Guidance for treating Asthma

The following guidelines are suitable for both children and adults and are the recommended steps to follow in an asthma attack:

- a) Sit up straight - don't lie down. Try to keep calm.
- b) Take two puffs of the reliever inhaler (usually blue) immediately and then one puff every two minutes, up to a maximum of 10 puffs.
- c) If she feels worse at any point while using the inhaler or she does not feel better after 10 puffs or you are worried at any time, call 999 for an ambulance.
- d) If the ambulance is taking longer than 15 minutes you can repeat step b)

If your symptoms improve and you don't need to call 999, you still need to make an urgent same day appointment to see your GP.

### Emergency Asthma Kits

These are located in the Sports Centre, in Reception and the Health and Wellbeing Centre. The nursing team are responsible for training, use, storage, care, disposal and record keeping. An emergency inhaler can be used if a students' prescribed inhaler is not available (for example it is lost or empty). Training will be updated annually to staff during start of year inset.

Only Students with diagnosed asthma and/or who have been prescribed a reliever inhaler may use an emergency inhaler. The health centre staff will maintain an up to date register of those diagnosed and/or have been prescribed a reliever inhaler and will only be given to those who have had parental consent. The register will be reviewed annually or earlier if any changes. A copy of the register will be stored in the emergency asthma kits.

### Guidance for the Use and Storage of Inhalers

Girls with asthma, who are prescribed inhalers, will be recorded on iSAMS. These pupils must keep their inhalers with them at all times.

In the event of a mild wheezy attack

- The pupil should be helped to find her inhaler and advised to take 2 puffs
- Allow the pupil to sit in an upright position in a well-ventilated area
- Avoid any fuss or panic

After a few moments the symptoms should be relieved, and the pupil may continue with normal activities. However, if the symptoms are not relieved, please contact the Health and Wellbeing Centre immediately.

### **External Trips**

The Trip Leader should check iSAMS and obtain the names of girls who have inhalers. Pupils must have their inhalers with them. This should be checked by the member of staff at the start of the trip, before leaving School. If the girls do not have their inhaler, they will not be permitted to go on the trip.

### **Boarders and Weekly Boarders**

It is the responsibility of the School Medical Officer to prescribe any inhalers. Inhalers prescribed for use at specific times must be kept locked in the dispensary in the relevant Boarding House. Girls issued with blue inhalers (bronco-dilators), MUST keep them with them at all times and remember to transfer them between bags accordingly.

### **Day Girls and Flexi Boarders**

It is the responsibility of the parent to provide the inhalers; parents can send in spare inhalers which will be kept in the Health and Wellbeing Centre.

Inhalers cannot be prescribed by the School Medical Officer for day girls or flexi boarders.

### **Example Letter to inform parents of emergency salbutamol inhaler use:**

Child's name:

Class:

Date:

Dear

This letter is to formally notify you that *(name of pupil)* has had problems with her breathing today at o'clock. This happened when *(description of what pupil was doing at the time and where she was)*. *(name member of staff)* helped her to use her asthma inhaler.

The inhaler used was *(please tick sentence that applies)*

Pupil's own prescribed inhaler

Pupil's own prescribed spare inhaler

School's emergency inhaler

Number of puffs given:

Additional information:

*(if emergency inhaler was used please give reason why the pupil's own or spare inhaler was not accessible)*

Although they soon felt better, we would strongly advise that you have your daughter seen by your own doctor as soon as possible.

Yours sincerely,

## Appendix 6 - Good Practice Guide

### Disposal of Blood and Bodily Fluids

In the event of spillage of any bodily fluids, the site must be cleaned using the contents of a Bio Hazard Kit. The kit has a full set of instructions, please familiarise yourself with them. (This is for your protection!). You must wear the protective gloves provided.

- All used materials must be placed in the yellow bag and returned immediately to the Health and Wellbeing Centre for disposal.
- Please keep the kit with the first aid box. In the event of the kit being used, contact the Health and Wellbeing Centre and we will replace it.
- Please inform the Domestic Services Supervisor if the spillage covers a large area or if bedding, clothing, etc. needs laundering. Soluble Hot Water bags must be obtained for items needing laundering.

### Control of Head Lice

Detecting head lice - If head lice are suspected, carry out detection combing

- Wash hair with ordinary shampoo
- Rinse hair and apply lots of ordinary conditioner
- Comb hair with normal comb to get rid of tangles
- Switch to fine tooth detection comb
- **Slot the comb's teeth into hair at roots so that it is touching scalp** and draw the detection comb through to the tips of the hair
- Comb all parts of the hair, working around the head
- Check the comb for lice after each stroke
- If lice are detected, clean comb by wiping on a tissue before next stroke and putting any live lice and nits into a bowl of water.
- After whole head has been combed, rinse out the conditioner

*NB. It takes 20-60 minutes to perform detection combing thoroughly, depending on thickness of hair.*

Treatment of head lice:

- Wet combing or 'bug busting' is used to remove lice without using chemical treatments.
- Bug busting kits are available from the Health and Wellbeing Centre.
- Repeat steps 1 to 10 of the detection method.
- Methodically remove lice with comb.
- Rinse hair.
- Repeat every three days for at least two weeks.
- Insecticide lotion can be used if the wet combing method proves unsuccessful after 2 weeks.
- Seek advice from the Health and Wellbeing Centre if infestation is difficult to treat.

### Hot Water Bottles / Heat Pads

Hot water bottles should NOT be used anywhere in School, as there is a risk of burn injuries with their use. All Houses should have a wheat bag/heat pad. Wheat bags can be used to ease muscular pains and painful periods. A wheat bag should be heated in the microwave for a maximum of 2 minutes. If any House needs a replacement wheat bag, please contact the Health and Wellbeing Centre.

### Steam Inhalations

This procedure is an effective method to clear congestion in nasal passages and sinuses during upper respiratory tract infections. The following method should be adopted to avoid scalding. A member of staff must not leave a pupil to administer this herself:

1. Water temperature – should be hot, creating raising steam, but not boiling
2. Water should be placed in a non-heat conducting bowl and the bowl must be placed in a sink
3. Mix 5mls of Menthol and Eucalyptus solution into the hot water
4. The recipient should lean over the sink, with her eyes closed, breathing through the nose until passages feel clearer *This may be repeated 3 – 4 times a day*

## Appendix 7 – Homely Remedies Guide

Medication	Dose	Uses
Paracetamol (500mg Tabs or Syrup 250mg/5mls) or Paracetamol (Soluble Tabs 500mg)	6-10 years - 250mg (0.5 of a tablet) every 4 hrs 10-12 years - 500mg (1 tablet) every 4 hrs 12-15 years 750mg (1.5 tablets) every 4 hrs Over 16 years - up to 1g (2 tablets) every 4 hrs  Maximum 4 doses in 24 hours If pupil is taking <b>any</b> other medication, please check with the H&WBC	General pain relief  Reduction of raised temperature
Ibuprofen 200mg - 400mg tablets	Over 12 years - (1-2 tablets) 200mg – 400mg 6-8 hourly, up to 3 doses (max 6 tablets) in 24 hours  Not to be given if Mefanamic Acid is prescribed for period pain.	General and muscular pain.  Do not give if history of stomach disorders, known sensitivity to aspirin or other anti-inflammatory drug  Avoid giving to asthmatics unless it is prescribed
Simple Linctus	5mls up to 4 times	Relief of dry, tickly cough
Throat Lozenges	Up to 8 in 24 hours	Relief of sore throat
Menthol and Eucalyptus Inhalation	See Good Practice Guide (appendix 3)	To clear nasal/sinus congestion in upper respiratory tract infections
Stugeron 15mg tablets	Over 12 years 2 tablets 2 hours before travelling. 1 further tablet after 8 hours if required.	Travel Sickness
Bonjela	Only over 16 years Apply to affected area 3 hourly up to 6 times daily.	To relieve painful mouth ulcers Refer to H&WBC if symptoms persist for 72 hrs
'Wasp-Eze' Spray for all stings	Spray directly on to area around insect sting for 2-3 seconds Repeat ONCE after 15 minutes if necessary	For all insect bites and stings including nettle
Chlorphenamine 4mg tablets (Antihistamine)	6-12 years – 0.5 tablet 3 to 4 times daily Over 12 years - 1 tablet 3 to 4 times daily	For mild allergic reaction, itching, red rash Contact Health and Wellbeing Centre to inform of administration immediately

In all cases refer to Health and Wellbeing Centre if symptoms persist.

- Only medication on this list may be administered without prescription.
- Prescribed medication by a Doctor must remain in its original package with chemist's label clearly visible.
- Medication must only be administered to the patient it has been prescribed for.
- All homely remedies and prescribed medication **MUST** be recorded on individual's drug chart.

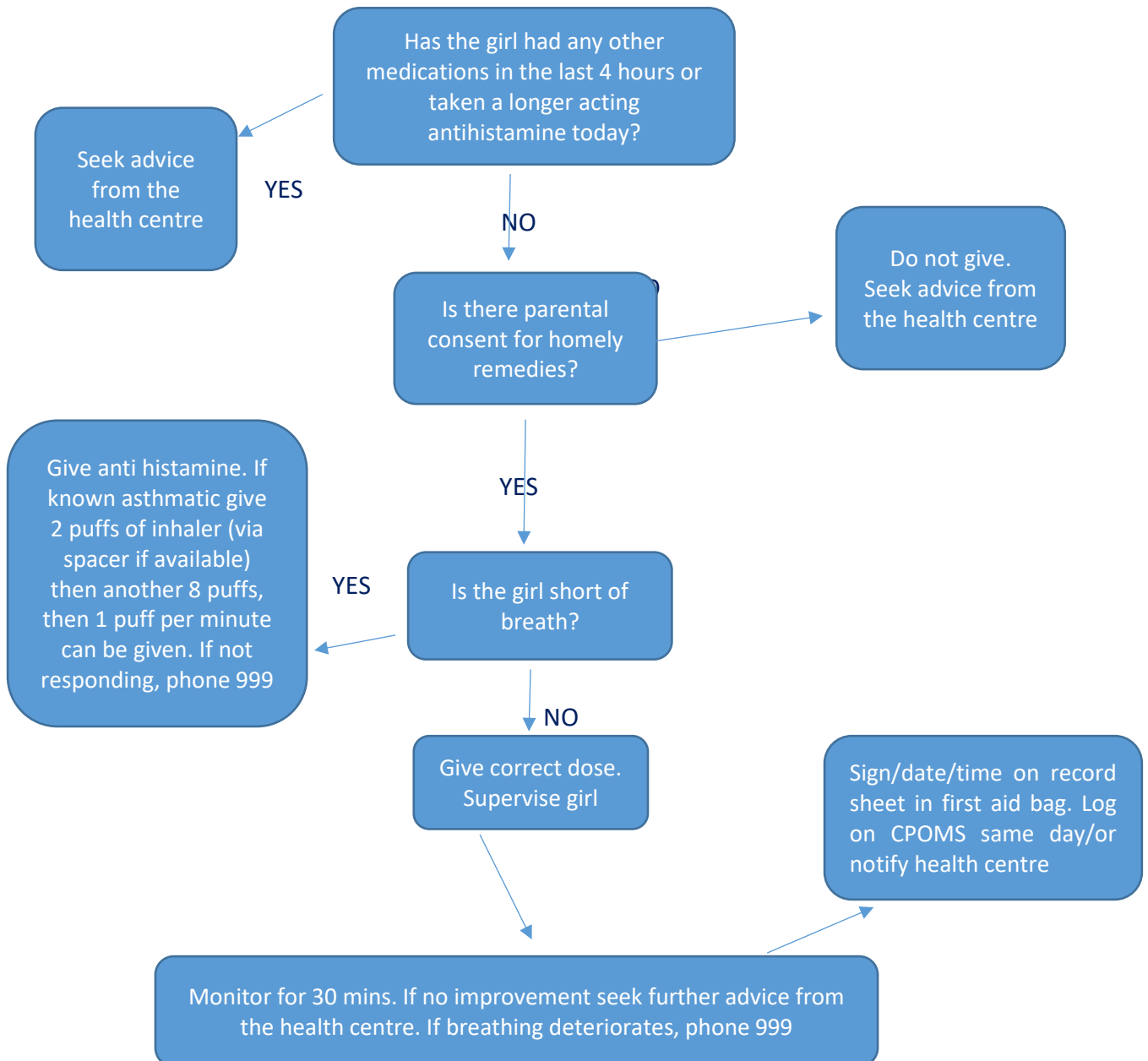
## Piriton Administration

## Chlorphenamine / Piriton

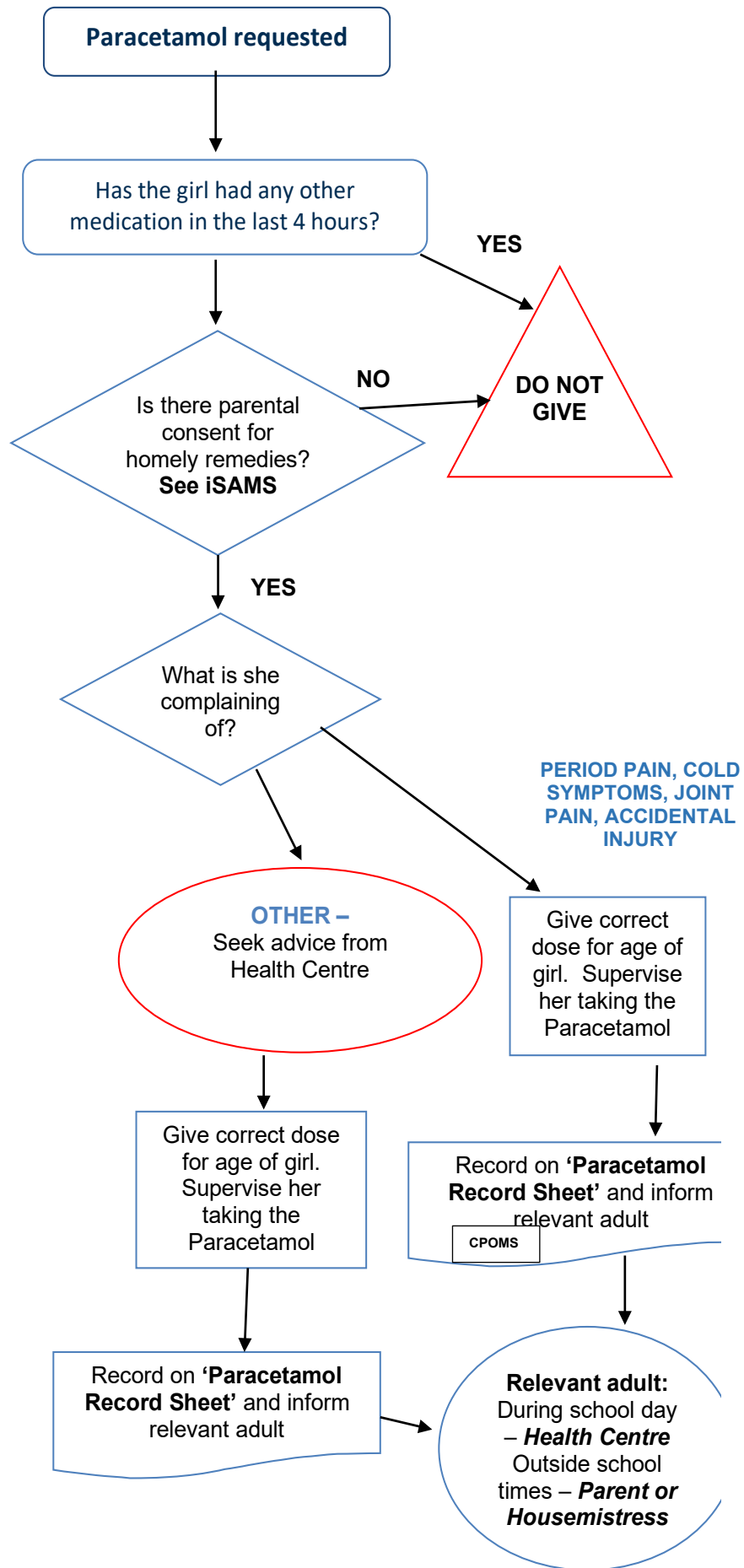
Under 6 not recommended.

### When to give:

Signs of allergy such as bee stings, hayfever, Hives or itchy skin rash, bites, itchy or tingling mouth, swollen lips, face or eyes. Always be alert for signs of anaphylaxis. **Antihistamines will not work in time for a severe allergic reaction. 999 should be called in this instance. Signs of anaphylaxis: Difficulty breathing, swelling of lips, tongue, throat, skin rashes/hives, increased anxiety. Usually required 2 or more symptoms and can occur quickly.**



# Paracetamol Administration





## Paracetamol and Piriton (anti-histamine) Record Sheet

Date	Name	House/DG	Dosage mg	Reason	Time given	Parent/ house/HC informed	Initials

Review Date:

Nurse Signature:

Comment:

## Appendix 8 – Medication

### Administration of medication

When a medicine is administered either by qualified nurses or by teaching or boarding staff, the following procedure will be followed:

- Check what the pupil has been prescribed: on the drug administration chart and the pharmacy label.
- Check the identity of the pupil
- Ask whether the pupil wants the medication
- Make sure no one has already given it.
- Prepare the correct dose for the time of day.
- Give the medication and offer a drink of water.
- Sign the record.
- Nurses/house/teaching staff will also enter the administration into the medical notes onto CPOMS.

### Medication from home

Parents must inform the Health and Wellbeing Centre of any medication prescribed at home by their family GP. On return to School after a holiday, any new medication must be given to the relevant Housemistress. The School Medical Officer should then see the girl with her medication during morning surgery at the earliest opportunity.

Any medicine from overseas should be accompanied by a letter in English to the Medical Officer giving a translation and outlining treatment.

### Prescription Drugs for Prep Boarders and Senior School Girls

Short courses and long-term medication

- Medication prescribed by the School Medical Officer, accompanied by a drug administration chart is collected by a member of the Boarding House Staff from the Health and Wellbeing Centre OR a pupil may come to the Health and Wellbeing Centre to receive her medication
- The Drug Chart must be kept in the Dispensary.
- All prescription drugs must be kept in a locked cupboard within the Dispensary and administered from there.
- Medication prescribed by a Doctor must remain in its original package with chemist's label clearly visible.
- Medication must ONLY be administered to the patient it has been prescribed for.
- The member of staff who administers the medication must check the dose and time of the drug which is to be administered, identify the girl by name and observe her taking the drug. Under no circumstances should medication be pre-dispensed into medicine pots for administration at a later time.
- The member of staff administering the medication must initial the girl's drug chart for each individual drug against the appropriate date and time.
- If the girl refuses to take the medication an 'R' must be recorded on her drug chart and a report should be sent to the Health and Wellbeing Centre stating the reason for the refusal.

- It is the responsibility of the Housemistress to ensure that the medication is administered at the correct time when the girl is in the Boarding House.

### **Prescription Medications for Year 7 – 11 Day Girls**

Medicines for day pupils should only be brought into school when absolutely necessary and should be stored at the Health and Wellbeing Centre, with the exception of inhalers and adrenaline auto-injectors. Girls must not have medication in their possession without the knowledge of the Health and Wellbeing Centre staff. Whenever possible, day boarders must take any prescribed/regular medication outside of school hours.

### **Prescription Drugs in MSJ Prep**

Girls on medication should bring their medicine to school. Parents are required to email confirmation of the medicine and details of its administration to Form Tutors. This information will then be stored on CPOMS. Medicine is either kept in a locked cupboard in the Prep Office or in the fridge in the lockable Prep Kitchen. Medicine will be administered by the Form Tutor or Head of Year in accordance with the emailed instructions. All medicines are returned to parents by hand at the end of the day. Any medication given is recorded on a pupil's CPOMS record. Where medicine has been administered to an EYFS child, parents will be informed of the time it was administered, as soon as is practicable and before the end of the day.

### **Prescription Drugs in the Sixth Form**

MSJ encourages Sixth Form pupils to become more independent. If students are prescribed medication from the School Medical Officer, they are encouraged to take their prescription and collect the medication themselves from the local chemist if they are well enough. Pupils are allowed to keep their own medication and self-administer. Pupils are required to complete a self-administration risk assessment prior to being given a prescription

All Girls are given guidance from the Health and Wellbeing Centre staff on the safe storage and administration of medication during the first week of the Autumn Term. This is reinforced every term in a talk delivered by a member of the Health and Wellbeing Centre Team. If we are not confident that a drug will be administered or stored safely we will order the prescription to be delivered to school and it will be sent to the Housemistress with a drug chart. This is also the protocol for all lower and middle school girls. (see forms at the end of this appendix)

### **The Contraceptive Pill**

On occasions the Doctor may prescribe the contraceptive pill when the patient wishes to remain confidential. In these cases, we are not permitted to inform the Housemistress and are therefore not able to follow normal dispensing guidelines. This only applies to girls in Years 9-11. In this situation the guidelines below are followed: -

- If a middle school girl is prescribed the contraceptive pill they are permitted to collect the medication from the Health and Wellbeing Centre and to self-administer the tablet each day.
- These girls are deemed to be 'Fraser Competent' by the prescribing Doctor prior to any contraceptive being prescribed. They are instructed very carefully on how to take the tablet and how to store it in a safe place within their personal property.
- All girls wishing to be prescribed the contraceptive are actively encouraged to use the contraceptive injection as this ensures their contraception without having to store medication or remember to take a tablet on a daily basis.
- Contraceptive pills are stored in the Health and Wellbeing Centre and only given to the girl in 'one month at a time' quantities. Smaller amounts cannot be given as they are provided in a 'one month' foil pack with days of the week stamped onto the pack.
- The contraceptive pill is never prescribed for anyone Health and Wellbeing Centre staff believe would not take the drug in an appropriate way or store it in an appropriate way.

- Risks of overdose - The two most noticeable signs of a birth control pill overdose are nausea and vomiting. Some women may also notice unexplained vaginal bleeding for two to seven days after the overdose has occurred. If another girl were to overdose on contraceptive pills they would be taken to hospital with the empty / part empty contraceptive packet and the hospital staff informed of the number of pills that had been taken.
- As part of our (verbal) risk assessment we ask the girls who they share a room with, whether this person would be aware that she is on the pill and how to store the medication safely. If we felt that any other girl/s in the room were at risk of overdosing on the Contraceptive pill it would not be dispensed. It is ONLY the Contraceptive pill that Housemistresses would not be aware of girls self-medicating and only if we could not persuade the girl to let us inform the Housemistress. Pupils are also encouraged to talk to their parents and inform them that she is taking the contraceptive pill.

### **Non-Prescription Medication**

Parental consent must be obtained before non-prescription medication is administered. The parental signature for consent is on the Health Questionnaire kept in girl's medical records in the Health and Wellbeing Centre. It is the responsibility of the Nursing staff to ensure current consent and to inform the Boarding Staff of any discrepancies. This information is updated on iSAMS. This must be checked prior to the administration of any homely remedy. If there is no consent the drug must not be administered.

The Homely Remedies Guide (**Appendix 5**) allows non-nursing staff to administer medication to girls from the general sales list, as agreed by the Medical Officer. Homely remedies (Paracetamol, Ibuprofen, Antacids, Simple Linctus, Antihistamines and Throat lozenges) must be administered using the same procedure as instructed above for prescription medication, and must be stored in a locked cupboard in The Dispensary. They must also be entered on CPOMS with relevant members of House and Nursing staff linked to the record. Homely remedies are dispensed as a single dose and are taken under supervision.

Paracetamol and Piriton (also known as Chlorphenamine) is available in the First Aid bags (in boxes of 16 tablets) for staff to dispense in single doses as per the protocol. Administration of these drugs is recorded on the Paracetamol / Piriton Record Sheet – all relevant paperwork will be included in the bag. Staff are made aware that the bag contains Paracetamol and that they must not leave the bag with girls unattended. (**Appendix 7**)

The Health and Wellbeing Centre must be informed of any medication administered from the Homely Remedies list in the Houses or by staff on school trips.

Sixth Form Boarding Houses are supplied with a stock from the Homely Remedies Guide, for administration to girls within the House. These must be stored in a locked cupboard and their administration must be recorded on CPOMS with the Health and Wellbeing Centre copied in. Girls are not permitted to self-administer homely remedies.

### **Administration of Vitamins in the Boarding House**

Vitamins must be treated in the same way as other medication in that their use must be documented. All pupils under 16 must have parental consent to have vitamins in school.

### **Exeat Weekends and Educational Visits**

Prescribed medication must be collected and stored safely under the control of the Lead Member of Staff. The Drug Chart should also be taken and the medication administered as detailed in Sixth Form girls may be responsible for their own medication.

On return to School any member of staff who has administered medicines from the Homely Remedies list must register this on CPOMS to inform:

- The Health and Wellbeing Centre
- The appropriate Housemistress for boarders
- Parents for day girls

### **Storage and Administration of Controlled Drugs**

All controlled drugs will be kept in a locked cupboard within a locked cupboard in the school Health and Wellbeing Centre. The medication will be counted prior to the administration of the next dose and this must be witnessed by two members of staff, one of which is a qualified nurse. Both members of staff should sign for the drug in the drug book. All medications, except for inhalers and Adrenaline auto-injector should be collected by parents at the end of term.

### **Disposal of Medicines**

Any unclaimed or out of date medicines will be sent to the pharmacy for destruction. The school nurses are responsible for checking the dates of medication and arranging for the disposal of any that have expired within the Health and Wellbeing Centre and the Boarding Houses. This check is done every term.

### **Adverse Reactions to Medicines**

- Administration of the medicine will be stopped with immediate effect and the school Medical Officer or out of hours GP service will be informed.
- All details pertaining to the reaction will be documented in the pupil's medical notes and parents and boarding staff will be informed.
- Warning flags will be posted on both the girl's paper and EMIS notes.

### **Medicines given in Error**

- The school Medical Officer or out of hours GP service will be informed as soon as the error is discovered.
- The advice given by the doctor will be taken and documented.
- All details pertaining to the error will be documented in the girl's medical notes and parents and boarding staff will be informed.
- The school Medical Officer and nursing team will discuss the reasons for the error and put in place any measures required to prevent this happening in the future.

## Self-Medication Risk Assessment

Name:

DOB:

House:

Date of First Assessment:

- Self-Medication is where the pupil takes responsibility for taking her own medicine
- Each girl's capability to self-medicate must be reassessed on a regular basis and the girl must be Fraser Competent.
- Self-medication increases understanding of their medication and the condition it is being taken for.
- Self-medication encourages responsibility for own health.
- Only a Doctor can prescribe medication to be self-administered.

### Drugs excluded from self-medication are:

- Homely Remedies (Paracetamol, Ibuprofen, Simple linctus, Antihistamines, Throat lozenges and Antacids)
- Controlled Drugs

### Declaration

It is my responsibility to:

- Ensure I understand what the medication is and what it is for.
- Always read and understand the label on the dispensing box and the leaflets contained within the medication box and seek explanation if I do not understand anything.
- To ensure that I understand the dose prescribed and when and how to take medication.
- To make sure that I am aware of side effects and possible allergic reactions.
- To ensure the safe storage of my medication and I appreciate the necessity for safe storage.
- Never share medication with anyone else.

**Comments:**

### Pupil:

I have discussed the declaration above with the nurse and agree to be responsible for the administration of my own medication.

**Name of pupil:**

**Signature of pupil:**

### Nurse:

I have discussed the declaration above with the pupil and assess that she is able to be responsible for the administration of her own medication.

**Registered Nurse:** *(Full name and signature)*

## Summary of Medical Talk to Sixth Form

### **Storing and Administering Medicines Safely**

- You are NOT permitted to buy homely remedies over the counter at a pharmacy. Homely remedies include; Paracetamol, Ibuprofen, Antihistamines, Simple Linctus and Antacids. All of these medicines are available in the School Health and Wellbeing Centre and Paracetamol and Ibuprofen are available in the Boarding Houses. They will be dispensed in single doses and each dose will be recorded.
- Check directions on medicines as some require taking on an empty stomach (absorbed more quickly into bloodstream)/with food (to avoid stomach irritation)/mixed with something, avoid alcohol/certain foods.
- Always keep medicines in a cool, dry, secure place out of direct sunlight (out of children's reach). Some medicines require refrigeration. Bathroom cabinets not always ideal due to humidity and warmth (an environment that speeds up a drug's breakdown process). Room temperature generally ideal.
- Always keep medicines in their original container (may look like sweets/soft drink otherwise) and do not mix medicines together in the same container, even if they are the same as they may have different expiry dates or dosages.
- Don't leave the cotton plug in a medicine bottle. This can draw moisture into the container.
- Check the expiry date each time you take medicine. Replace any medication that is out of date.
- Never use a medication that has changed colour, texture or odour, even if it has not expired. Take any capsules or tablets that stick together, are harder or softer than normal, or are cracked or chipped to the Health and Wellbeing Centre or a Pharmacy for safe disposal.
- Follow any particular storage instructions (refrigerate/out of sunlight etc)
- You are requested NOT to buy medication over the counter. If you buy medicines over the counter for a cold, you must always check the list of medicines/ingredients in each product, as many cold/flu medicines contain Paracetamol.
- Never share medicines prescribed to you with others. (may be unsuitable for them)
- Never exceed the recommended dosages
- Antibiotics: You will often feel better before you finish all the doses of medicine. It is important to complete the course prescribed to prevent the infection returning.
- Always ensure you mention any allergies/illnesses you have as some medicines may not be suitable.
- Try to take your medicine dose at the recommended intervals; taking them too close together increases the risk of side effects occurring.
- If you are taking several different medicines, check if they can be taken together, or if they must be taken at different times in order to avoid any adverse effects or a reduction in effectiveness caused by an interaction between them.
- All drugs have side effects and you should know what these are. Read the leaflet that comes with your medicine/s. Severe side effects – inform GP/999

### **Travelling Abroad/Home**

- Before departure, list all your medications, as well as the name and number of your pharmacist.
- Pack your medicine in a holdall (hand luggage), not your suitcase.
- Take an extra supply with you in case your return is delayed.
- Never leave medicines in a car. Heat can quickly destroy medicines.
- Watch time changes. Set a separate watch to your usual time so you can remember when to take your medicine. If you are travelling for a short holiday you may find it more convenient to take your medicine in line with UK time. Generally, time zone changes of up to two hours do not appear to pose any significant problems for most medicines. Be careful of time differences of more than two hours to ensure that medicines are neither over nor under dosed.

### **Adrenaline Auto-Injectors**

- If there are any girls in the sixth form that carry an adrenaline auto-injector, ask their permission to disclose who they are and give some guidance on anaphylaxis and the use of the auto-injector.
- Offer a more in depth training to the girl's close circle of friends.

## Safe Storage and Dispensing of Medicines Check List

Boarding House:

Date:

<b>Medicine Talk complete</b>	
<b>Drug Amnesty</b>	
<p><b>Dispensary Check:</b></p> <ul style="list-style-type: none"> <li>• Medication correctly stored</li> <li>• Medication in date – checking procedure in place</li> <li>• Prescription medication in original packaging with pharmacy label</li> <li>• Medicine dispensed according to policy</li> <li>• Parental consent for homely remedies routinely checked prior to dispensing</li> <li>• Correct dose always given</li> <li>• Paracetamol guidelines available</li> <li>• All medication taken under supervision</li> </ul>	
<p><b>Drug records Check:</b> Each girl has a separate named drug record chart with DOB. The following should be recorded in the patient notes, whether paper or computer based.</p> <ul style="list-style-type: none"> <li>• Reason for administration</li> <li>• Dose given</li> <li>• Time given</li> <li>• Signature / initial</li> <li>• Pupils, Health and Wellbeing Centre and parents (if appropriate) should be informed of when the next dose is due if applicable.</li> </ul> <p><b>Allergies</b></p> <ul style="list-style-type: none"> <li>• The allergy status of all pupils and staff MUST be checked prior to any medication being administered. Known allergies must be clearly recorded in the patient's notes</li> </ul>	
<p><b>Adrenaline auto-injectors</b></p> <ul style="list-style-type: none"> <li>• Accessible to all staff</li> <li>• Travel with girl on trips / Exeats</li> <li>• Regular check of expiry dates</li> </ul>	
<p><b>Drugs from overseas:</b></p> <ul style="list-style-type: none"> <li>• What is the school procedure?</li> <li>• Are procedures followed?</li> </ul>	
<b>Comments:</b>	



# Medicine Chart for Prescription Medicine

Key for use if drug not given:- **R** = Refused    **N** = Nausea    **V** = Vomiting    **O** = Other

Name		DOB						House					
Medication  (Name, dose & frequency)	Time -	-Date <sup>®</sup>						-Date <sup>®</sup>					
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## Appendix 9 - Medical Emergencies Procedure

In the event of a sudden unexplained or possibly life-threatening medical situation or a severe illness or injury, please dial 999 for Emergency Medical Services. The incident should be handled expediently, efficiently and calmly. Examples of life-threatening conditions may include, but are not limited to, the following:

- Choking,
- Severe chest pain and/or shortness of breath,
- Loss of consciousness,
- Uncontrolled bleeding
- Debilitating injuries
- Anaphylaxis

If an employee, resident, pupil, visitor, guest or patient incurs an injury/illness that appears to be life-threatening, the person reporting the incident should immediately call 999 and provide the dispatcher with:

- his or her name;
- his or her location;
- name of the injured/ill person, if known;
- nature of the injury/illness, if known;
- any special directions regarding the situation or location

Unless otherwise requested or indicated, the injured/ill person should be transported by ambulance to the hospital.

After calling 999, the following key contacts must be informed:

- |   |                     |
|---|---------------------|
| • The Health and Wellbeing Centre           | 01684 574454 (7454) |
| • The Director of Pastoral Care             | 01684 584628 (7628) |
| • The Director of Operations and Compliance | 01684 584604 (7604) |

### Malvern St James Employees

The above offices must be contacted when employees have work-related illnesses of a minor or major nature within normal working hours. The employee's line manager is responsible for completing an "Accident Report" form regardless of whether the illness or injury has occurred on or off the school site. The accident report form can be found on Firefly. The Accident Report must be: completed within 48 hours of the occurrence; and submitted to the Director of Operations and Compliance.

### Non-Malvern St James Employees

All accidents which involve persons who are not employed by the school must be reported immediately to the Director of Operations and Compliance, as above.

### Pupils

Inform the Health and Wellbeing Centre and the pupils' parents immediately. Document all known information on CPOMS

### Assisting in a Medical Emergency

- You can always do something to help in any emergency.
- Take appropriate safety precautions for yourself and the safety of others.
- Be alert to possible dangers at the scene. Move a victim only if the victim's life is endangered.
- Communicate effectively, giving specifics on what, where, when, and the number of persons involved. Ask a conscious victim for permission before giving care
- Provide necessary information to Emergency Services upon their arrival.
- Comfort the victim as well as bystanders.
- Keep the area free of unnecessary traffic and help protect the victim from possible dangers.



## Appendix 10 - MSJ Pandemic Procedure

This procedure has been written in response to the real risk of influenza or another pandemic. A pandemic is the world wide spread of a new disease. An influenza pandemic occurs when a new influenza virus emerges and spreads around the world and most people do not have immunity. The school is mindful of the need to ensure it is in a position to respond to any such event but also not to cause unnecessary alarm by the production of such a policy.

### Background

Influenza is an acute respiratory illness due to infection with the influenza virus and is deemed to be the highest risk to the School. Uncomplicated influenza is defined as influenza presenting with fever, catarrh and generalised symptoms (headache, malaise, muscular and joint pain) and sometimes gastrointestinal symptoms, but without any features of complicated influenza.

The World Health Organization (WHO) closely monitors all strains of influenza globally to see whether these viruses develop into a pandemic. The WHO operates a 6-level system of alerts in which level 6 indicates a global pandemic.

We closely monitor updates from the WHO and in the event of such an outbreak we would follow the guidelines of Public Health England and the WHO. Any specific instructions for monitoring would be added as an appendix of the policy.

The typical symptoms are: Sudden fever, sudden cough. Other symptoms may include: Headache, tiredness, chills, aching muscles, limb or joint pain, diarrhoea or stomach upset, sore throat, runny nose, sneezing, loss of appetite.

Current Advice: Day pupils who are ill and who have flu-like symptoms must stay at home and contact either their GP or NHS 111.

If a diagnosis of flu has been made the school must be informed.

### Personal responsibility

Staff and pupils are encouraged to note the following general advice, which can help prevent the spread of flu.

- CATCH IT: Cover your nose and mouth when coughing or sneezing and use a tissue.
- BIN IT: Dispose of dirty tissues, bag them and bin them.
- KILL IT: Maintain good basic hygiene, wash your hands frequently with soap and HOT water and clean hard surfaces regularly e.g. door handles, phones and worktops.

In the event of a case in school

- We will aim to treat rather than contain
- The pupil/s will be isolated appropriately
- Parents of the child with flu will be informed immediately
- If possible, parents will be asked to collect their child and for the child to remain at home until they are fully well and symptom free. If a pupil from an overseas family contracts flu, the guardian should provide appropriate care off site. Staff will be informed
- The Director of Pastoral Care will inform parents if there are a high number of cases
- The school may need to be closed if the numbers are so high that staffing resources are not adequate to care for the children
- In the event of a closure the school will provide pupils with academic work to complete

- If the school is forced to close during a public examination period, steps will be taken to notify the examination boards and to provide alternative arrangements.

### **Contingency planning**

- The school will review plans regularly in response to advice from the Department of Health
- The school will ensure that the Health and Wellbeing Centre is well stocked and that Housemistresses have the equipment that they need
- The school will not stockpile anti-viral medication and equipment
- The school will ensure that parent and staff contact details are up to date
- The school will maintain a list of contacts at the local Health Protection Unit who will help to assess the situation within the school and advise on further measures.
- The school will maintain an up to date cover time-table to ensure that lessons are covered in the event of staff absence. The allocation of cover is managed by the school Attendance Administrator
- The school Housekeeping Department will ensure that staff absence is covered so that high hygiene levels are maintained

If you feel you have flu-like symptoms:

- Stay home and rest.
- Take medicines such as Aspirin, Ibuprofen or Paracetamol to relieve the symptoms, children under 16 should not be given Aspirin or flu remedies containing Aspirin.
- Drink plenty of fluids.

### **General public health measures affecting schools during a pandemic**

The school will follow the best advice given to meet the needs of its community, accepting that the school cannot operate in isolation to public health measures.

Current government guidance is that people should try to continue their everyday (essential) activities as normally as possible during a pandemic, while taking personal responsibility for self-protection and social responsibility to lessen the spread of the virus.

The school will follow medical and public health advice on any subsequent waves of pandemic.

### **School actions**

The view of the majority of medical scientists is that a global pandemic of a new flu virus such as avian flu or swine flu is increasingly likely and probably inevitable. In the event of receiving advice from medical/governmental sources that a flu pandemic is imminent, the school will:

- Refer to the Critical Incident Policy
- Inform parents promptly of the situation and the school's response
- Update the school's response regularly in line with the emerging situation
- Use Firefly (Parent Portal) and other appropriate means to inform parents, so that advice is prompt and easily accessible, including arrangements for any exam candidates
- Act strictly on the generic advice given to the national population by the Chief Medical Officer and appropriate government agencies, such as the Health Protection Agency and LA

In preparing for a possible pandemic situation the school will act to:

- Publicise appropriate information and ensure reminders with regard to personal hygiene are on display and announced to pupils
- Check sufficient stocks of cleaning products such as tissues, soaps, detergents and alcohol gels are available for use

- Monitor very closely updates from the Department of Health and Local Government with regard to the possible spread of the pandemic within the local area
- Ensure that staff who show signs of infection are sent home and that pupils showing signs of infection are reassured, collected by their parents, or cared for in isolation in the school Health and Wellbeing Centre.

Every effort will be made to keep the school operating normally.

Daily updates will be posted on the school's parent portal.

### Closure of the School

If the school has to close, this will be communicated to students and staff first and then to parents as soon as possible thereafter. The school may close for students but still be open for staff. If the school is closed for pupils then it does not have the general duty of care, which it normally has when the school is open in session. Parents/Guardians will then be responsible for the safety and care of their children.

The school's parent portal will display information which will cover the arrangements for remaining open or the re-opening of the school following closure. Such decisions will be based on the ability of the school to respond to the advice provided. Remaining open or re-opening of the school will not necessarily be the same for pupils and staff.

<b>Authorised by</b>	Resolution of the School Council
<b>Signature</b>	
<b>Date</b>	17 March 2021

<b>Effective date of the Policy</b>	17 March 2021
<b>Review date</b>	January 2022
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